

UNITED STATES ENVIRONMENTAL PROTECTION AGENCY

DATE: 20 SEP 1982

3 SUBJECT: Resource Conservation and Recovery Act (RCRA) Regulatory Inspection Report
- Violations deemed minor per David Doyle Post-Inspection Meeting.

FROM: Billy J. Fairless, Ph.D. *Billy Fairless*
Chief, FINV/ENSV

TO: Michael J. Sanderson
Chief, AWCM/ARWM

An inspection of the facility listed below was conducted. A completed checklist is attached and the information on the Notification and Part A permit application is verified or changes indicated below. Copies of the Notice of Violation provided to the company is attached. The confidentiality statement may be submitted by the facility at a later date.

Facility Information:

Name: General Motors Corporation, Assembly Division, Leeds Plant

Location: 6817 Stadium Drive, Kansas City, Missouri 64139

EPA ID No.: MOD000822668

Date of Inspection: September 9, 1982

Activities: G, Stor

Inspection Data:

EPA Inspectors: Vincent V. Smith, P.E.

State Inspector: Richard Nixon

If joint, EPA or State Lead: EPA lead

Facility Contact(s):

Name: Jerome E. Daniels, P.E.

Title: Director, Plant Engineering

Name: Larry N. Pemberton

Title: Environmental Engineer



R00157919

RCRA RECORDS CENTER

Part A/Notification Information:

G.M. revisd Part A, sent it in to EPA and then requested this revision be returned to G.M. The revision was returned to G.M. by EPA.

The facility no longer produces lead wastes from grinding body joints. The process for joining has changed.

Rec'd
SEP 23 1982

SEP 22 1982

Resource Conservation and Recovery Act (RCRA) Regulatory Inspection Report
- Violations deemed minor per David Doyle Post-Inspection Meeting.

Chief, IAW/ENSV
Atty. J. Fairless, Ph.D.

Chief, AWC/VANN
Michael J. Sanderson

An inspection of the facility listed below was conducted. A completed checklist is attached and the information on the notification and Part A permit application is verified on changes indicated below. Copies of the Notice of Violation provided to the company is attached. The confidentiality statement may be submitted by the facility at a later date.

Facility Information:

Name: General Motors Corporation, Assembly Division, Leads Plant

Location: 8815 Stadium Drive, Kansas City, Missouri 64130

EPA ID No.: MO00082508

Date of Inspection: September 9, 1982

Activities: A, 200

Inspection Data:

EPA Inspectors: Vincent V. Smith, P.E.

State Inspector: Richard Nixon

Joint, EPA or State Lead: EPA Lead

Facility Contact(s):

Name: Jerome L. Daniels, P.E.

Title: Director, Plant Engineering

Name: Larry M. Pemberton

Title: Environmental Engineer

Part A Notification Information:

G.M. revised Part A, sent it in to EPA and then requested this revision be returned to G.M. as violation was returned to G.M. by EPA.

The facility no longer produces lead wastes from grinding body joints. The process for body has changed.

RECEIVED

SEP 22 1982

**AIR AND HAZARDOUS MATERIALS
DIVISION**

SEP 23 1982

Hazardous wastes presently produced are as follows:

- D002 Corrosives (caustive sludge)-Larry Pemberton estimated that less than 10 barrels of this sludge per year are produced.
F003 Acetone and F005 toluene (spent non-halogenated solvents) produced was estimated at approximately 157,000 lbs per year.

Hazardous wastes previously listed and either not now produced or produced and considered non-hazardous are:

- D008 (lead wastes) are not produced.
F006 Electroplating Sludge (Bonderite treatment) is considered non-hazardous. It is sent to U.S. Pollution Control.
F017 Paint residues is no longer listed as hazardous.

Attachments:

Photos
Notice of Violation
Checklists
Confidentiality Notice (to be mailed later)

RCRA INSPECTION REPORT - INTERIM STATUS STANDARDS

I. General Information:

(A) Facility Name: General Motors Corp, Assembly Div
(B) Street: 6817 Stadium Drive
(C) City: K C (D) State: MO (E) Zip Code: 64129
(F) Phone: 913-281-7388 (G) County: Jackson

(H) Operator: Same as above

(I) Street: _____

(J) City: _____ (K) State: _____ (L) Zip Code: _____

(M) Phone: _____ (N) County: _____

(O) Owner: Same as above

(P) Street: _____

(Q) City: _____ (R) State: _____ (S) Zip Code: _____

(T) Phone: _____ (U) County: _____

(V) Type of Ownership: _____ Federal _____ Municipal ☒ Private
_____ State _____ County

(W) Date of Inspection: 9/9/82 (Q) Time of Inspection (From) 9:00 (To) _____

(X) Weather Conditions: Fair

(2) Inspection Participants

Title

Telephone

II. Description of Site Activity

(A) ☒ Generator (Form 2)

(B) ☐ Transporter (Form 3)

(C) ☐ Chemical, Physical
and Biological Treatment (Form 4)

(D) ☐ Storage (Form 5)

(E) ☐ Landfill (Form 6)

(F) ☐ Incineration (Form 7)

(G) ☐ Land Treatment (Form 4)

(H) ☐ Thermal Treatment (Form 7)

(I) Comments: G.M. Inspection team due at
plant next week.

Supplemental forms (Listed in Parathesis) must be completed for each activity inspected. Attach all Supplemental forms to this report.

Yes

No

Not
Inspected

See Remark
Number

(J) Has this facility
Submitted a Part A
Permit Application?

☒

☐

☐

☐

RA COMPLIANCE INSPECTION REPORT
GENERATORS CHECKLIST

Section A - EPA Identification No.

1. Does Generator have EPA I.D. No.?

☐ Yes ☐ No

a. If yes, EPA I.D. No. MOD 000822668

262.21 Section B - Manifest

1. Does generator ship waste off-site?

☒ Yes ☐ No

a. If no, do not fill out Sections B and D.

b. If yes, identify primary off-site facility(s) Use narrative explanations sheet.)

2. Does generator use Manifest?

☒ Yes ☐ No

261.5

a. If no, is generator a small quantity generator?

NA Yes ☐ No

1. If yes, does generator indicate this when sending waste to a T/S/D facility

NA Yes ☐ No

b. If yes, does manifest include the following information?

1. Manifest Document No.

☒ Yes ☐ No

2. Generators Name, Mailing Address, Telephone No.

☒ Yes ☐ No

3. Generator EPA I.D. No.

☒ Yes ☐ No

4. Transporter(s) Name and EPA I.D. No.

☒ Yes ☐ No

5. a. Facility Name, Address and EPA I.D. No.

☒ Yes ☐ No

b. Alternate Facility Name, Address and EPA ID NO.

☐ Yes ☐ No

c. Instructions to return to generator if undeliverable?

☐ Yes ☐ No

6. Waste information required by DOT - Shipping name, quantity, (weight, or vol.) containers (type and number.)

☒ Yes ☐ No

7. Emergency Information (optional)
(special handling instructions, phone no.)

☒ Yes ☐ No

- (8) Is the following certification on each manifest form?

☒ Yes ☐ No

This is to certify that the above named materials are properly classified, described, packaged, marked and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the EPA.

- (9) Does Generator retain copies of Manifests?

☒ Yes ☐ No

If yes, complete a through e.

- a. (1) Did generator sign and date all manifests? ☒ Yes ☐ No
 (2) Who signed for generator? Name W. Moody Title _____
- b. (1) Did generator obtain handwritten signature and date of acceptance from initial transporter? ☒ Yes ☐ No
 (2) Who signed and dated for transporter? Name Tim Neely Title Driver
- c. Does generator retain one copy of manifest signed by generator and transporter? ☒ Yes ☐ No
- d. Do returned copies of manifest include facility owner/operator signature and date of acceptance? ☒ Yes ☐ No
- e. Does generator retain copies for 3 years? have all of them ☒ Yes ☐ No

Section C - Hazardous Waste Determination

- 262.12 1. Does generator generate solid waste(s) listed in Subpart D (List of Hazardous Waste)? ☒ Yes ☐ No
- a. If yes, list wastes and quantities (include EPA Hazardous Waste No.) see report
2. Does generator generate solid waste(s) that exhibit hazardous characteristics? (corrosivity, ignitability, reactivity, EP toxicity) ☒ Yes ☐ No
- a. If yes, list wastes and quantities (include EPA Hazardous Waste No.) see report
- b. Does generator determine characteristics by testing or by applying knowledge of processes? testing & knowledge
1. If determined by testing, did generator use test methods in Part 261, Subpart C (or Equivalent)? ☒ Yes ☐ No
- a. If equivalent test methods used, attach copy of equivalent methods used.

sent out to Astec Lab.

3. Are there any other solid wastes generated by generators? ☒ Yes ☐ No
- a. If yes, did generator test all wastes to determine non-hazardous characteristics? ☒ Yes ☐ No
1. If no, list wastes and quantities deemed non-hazardous or processes from which non-hazardous waste was produced.
(Use additional sheet if necessary.)
-
-
-

Section D - Pre-Transport Requirements

1. Does Generator package waste in accordance with 49 CFR 173 178, and 179? (DOT requirements) ☒ Yes ☐ No
- 265.174 2. a. Are containers to be shipped leaking or corroding? ☒ Yes ☐ No
b. Use sheet to describe containers and condition.
c. Is there evidence of heat generation from incompatible wastes in the containers? ☐ Yes ☒ No
- 262.32 3. Does the generator use DOT labeling requirements in accordance with 49 CFR 172? ☒ Yes ☐ No
4. Does the generator mark each package in accordance with 49 CFR 172? ☒ Yes ☐ No
5. Is each container of 110 gallons or less marked with the following label? ☒ Yes ☐ No

Label saying: HAZARDOUS WASTE - Federal Law Prohibits Improper Disposal. If found, contact the nearest police or public safety authority or the U.S. Environmental Protection Agency.

Generator's Name and Address G.M.
6817 Stadium Drive
K.C. Mo 64129

Manifest Document Number _____

- 262.33 6. Does generator have placards to offer to transporters? ☐ Yes ☒ No
- 262.34 7. Accumulation Time *Transporters have their own. They are checked to see that the truck drive have them.*
- a. Are containers used to temporarily store waste before transport? ☒ Yes ☐ No

1. If yes, is each container clearly dated?
Also, fill out rest of No. 7 (Accum. Time) ☒ Yes ☐ No
- b. 1. Does generator inspect containers for leakage or corrosion? (265.174 - inspections) ☒ Yes ☐ No
2. If yes, with what frequency? daily
- c. Does generator locate containers holding ignitable or reactive waste at least 15 meters (50 feet) from the facility's property line?
(265.176 - Special Requirements for Ignitable or Reactive wastes) ☒ Yes ☐ No

NOTE: If tanks used, fill out checklist for tanks.

- d. Are the containers labeled and marked in accordance with Section D 3, 4, & 5 of this form? ☒ Yes ☐ No

NOTE: If generator accumulates waste on-site, fill out checklist for General Facilities, Section B - Preparedness and Prevention, Section C - Contingency Plan and Emergency Procedures

- e. Does generator comply with requirements for personnel training?
(Attach checklist for 265.16 - Personnel Training) ☐ Yes ☐ No

8. Describe storage area. Use photos and narrative explanation sheet.

262.40 Section E - Recordkeeping and Records

1. Does generator keep the following reports for 3 years?
 - a. Manifests and signed copies from designated facilities? ☒ Yes ☐ No
 - b. Annual reports ☒ Yes ☐ No
 - c. Exception Reports ☐ Yes ☐ No
 - d. Test results ☒ Yes ☐ No
2. Where are records kept (at facility or elsewhere)? at facility
3. Who is in charge of keeping the records? Name Larry Kimbata Title Env Eng

Section F - Special Conditions

- 262.50 1. Has generator received from or transported to a foreign source any hazardous waste? ☐ Yes ☒ No
 - a. If yes, has he filed a notice with the Regional Administrator? ☒ Yes ☐ No
 - b. Is this waste manifested and signed by Foreign consignee? ☒ Yes ☐ No
 - c. If generator transported wastes out of the country, has he received confirmation of delivered shipment? ☒ Yes ☐ No

CRA COMPLIANCE INSPECTION REPORT FACILITIES CHECKLIST

Section A - General Facility Standards

262.12

1. Does facility have EPA Identification No.?

 Yes No

A. If yes, EPA I.D. No.

If no, explain

MC0000822668

262.50

2. Has facility received hazardous waste from a foreign source?

Yes ☒ No

A. If yes, has he filed a notice with the Reg. Admin.

NA Yes No

255.13

Waste Analysis

3. Does facility maintain a copy of the waste analysis plan at the facility?

☒ Yes ☐ No

A. If yes, does it include

(1) Parameters for which each waste will be analyzed?

☒ Yes ☐ No

(2) Test methods used to test for these parameters?

✓ Yes No

(3) Sampling method used to obtain sample?

☒ Yes ☐ No

(4) Frequency with which the initial analysis will be reviewed or repeated?

✓ Yes No

(5) (for off-site facilities) Waste analyses that generators have agreed to supply? *NA*

NA Yes _____ No _____

(6) (for off-site facilities) Procedures which are used to inspect and analyze each movement of hazardous waste including:

a. Procedures to be used to determine the identity of each movement of waste?

ty ✓ Yes No

- b. Sampling method to be used to obtain representative sample of the waste to be identified? ☒ Yes ☐ No

265.14

4. Does the facility provide adequate security through

- A. 24-hour surveillance system? (e.g. television monitoring or guards) ☒ Yes ☐ No

OR

Plant Security

- B. (1) Artificial or natural barrier around facility (e.g. fence or fence and cliff)? ☒ Yes ☐ No

Describe *fence*
AND

- (2) Means to control entry through entrances (e.g. attendant, television monitors, locked entrance, controlled roadway access)? ☒ Yes ☐ No

Describe *Control at gate or lockers*

General Inspection Requirements

265.15 (b) 5. Does the owner/operator maintain a written schedule at the facility for inspecting:

- a. Monitoring equipment? ☒ Yes ☐ No

- b. Safety and emergency equipment? ☒ Yes ☐ No

- c. Security devices? ☒ Yes ☐ No

- d. Operating and structural equipment? ☒ Yes ☐ No

- e. Types of problems of equipment?

1. malfunction ☐ Yes ☐ No

2. operator error ☐ Yes ☐ No

3. discharges ☐ Yes ☐ No

265.15 (d) 6. Does the owner/operator maintain an inspection? ☒ Yes ☐ No

A. If yes, does it include:

(1) Date and time of inspection? ☒ Yes ☐ No

(2) Name of inspector? ☒ Yes ☐ No

(3) Notation of observations? ☒ Yes ☐ No

(4) Date and nature of repairs or remedial action? ☒ Yes ☐ No

B. Are there any malfunctions or other deficiencies not corrected? (Use narrative explanation sheet). ☐ Yes ☒ No

265.16 Personnel Training

7. Does the owner/operator maintain Personnel Training Records at the facility?
How long are they kept? ☒ Yes ☐ No

A. If yes, do they include:

(1) Job title and written job description of each position? ☒ Yes ☐ No

(2) Description of type and amount of training? ☒ Yes ☐ No

(3) Records of training given to facility personnel? ☒ Yes ☐ No

265.17 Requirements for Ignitable, Reactive or Incompatible Waste

(a) 8. Does facility handle ignitable or reactive wastes? ☒ Yes ☐ No

A. If yes, is waste separated and confined from sources of ignition or reaction, (open flames, smoking, cutting and welding, hot surfaces, frictional heat) sparks (static, electrical or mechanical), spontaneous ignition (e.g. from heat producing chemical reactions) and radiant heat? ☒ Yes ☐ No

1. If yes, use narrative explanations sheet to describe separation and confinement procedures.
2. If no, use narrative explanation sheet to describe sources of ignition or reaction.

B. Are smoking and open flame confined to specifically designated locations?

☒ Yes ☐ No

C. Are "No Smoking" signs posted in hazardous areas?

☒ Yes ☐ No

(b) 9. Check containers

A. Are containers leaking or corroding?

☐ Yes ☒ No

B. Is there evidence of heat generation from incompatible wastes?

☐ Yes ☒ No

(Use narrative explanations sheet to describe condition of containers.)

265.31 Section B - Preparedness and Prevention

1. Is there evidence of fire, explosion or contamination of the environment?

☐ Yes ☒ No

If yes, use narrative explanations sheet to explain.

265.32 2. Is the facility equipped with

A. Internal communication or alarm system?

☒ Yes ☐ No

(1) Is it easily accessible in case of emergency?

☒ Yes ☐ No

B. Telephone or two-way radio to call emergency response personnel?

☒ Yes ☐ No

C. Portable fire extinguishers, fire control equipment spill control equipment and decontamination equipment?

☒ Yes ☐ No

265.33

(1) Is this equipment tested to assure its proper operation?

☒ Yes ☐ No

D. Water of adequate volume for hoses, sprinklers or water spray system?

☒ Yes ☐ No

(1) Describe source of water

*City water
fully
plant sprinkled
underground storage tanks
backups
tanks and water system*

265.35 3. Is there sufficient aisle space to allow unobstructed movement of personnel and equipment? ☒ Yes ☐ No

265.37 4. Has the owner/operator made arrangements with the local authorities to familiarize them with characteristics of the facility? (layout of facility, properties of hazardous waste handled and associated hazards, places where facility personnel would normally be working, entrances to roads inside facility, possible evacuation routes.) ☒ Yes ☐ No

265.50 5. In the case that more than one police and fire department might respond, is there a designated primary authority?
a. If yes, list primary authority N.C. ☒ Yes ☐ No

265.52 (a) 6. Does the owner/operator have phone numbers of and agreements with State emergency response teams, emergency response contractors and equipment suppliers?
Are they readily available to all personnel? ☒ Yes ☐ No

Fulltime Nursing Staff
(c) 7. Has the owner/operator arranged to familiarize local hospitals with the properties of hazardous waste handled and types of injuries that could result from fires, explosions, or releases at the facility? *Doctor left and the will hire another.* ☒ Yes ☐ No

8. If State or local authorities decline to enter, is this entered in the operating record? *N/A* ☐ Yes ☐ No

265.52 Section C - Contingency Plan and Emergency Procedures

1. Is a contingency plan maintained at the facility? ☒ Yes ☐ No

a. If yes, is it a revised SPCC Plan? ☒ Yes ☐ No

2. Is there an emergency coordinator on site at all times? ☒ Yes ☐ No

Section D - Manifest System, Recordkeeping and Reporting

265.71 1. Does facility receive waste from off-site? ☐ Yes ☒ No

a. If yes, does the owner/operator retain copies of all manifests? *N/A* ☐ Yes ☐ No

(1) Are the manifests signed and dated and returned to the generator?

NA Yes ☐ No ☒

(2) Is a signed copy given to the transporter?

NA Yes ☐ No ☒

2. Does the facility receive any waste from a rail or water (bulk shipment) transporter?

Yes ☒ No ☐

a. If yes, is it accompanied by a shipping paper?

NA Yes ☐ No ☒

(1) Does the owner/operator sign and date the shipping paper and return a copy to the generator?

NA Yes ☐ No ☒

(2) Is a signed copy given to the transporter?

NA Yes ☐ No ☒

3. Has the owner/operator received any shipments of waste which were inconsistent with the manifest? (manifest discrepancies)

NA Yes ☐ No ☒

a. If yes, has he attempted to reconcile the discrepancy with the generator and transporter?

NA Yes ☐ No ☒

1. If no, has Regional Administrator been notified?

Yes ☐ No ☒

4. Does the owner/operator keep a written operating record at the facility?

✓ Yes ☒ No ☐

A. If yes, does it include:

(1) Description and quantity of each hazardous waste received?

✓ Yes ☒ No ☐

(2) Location and quantity of each hazardous waste at each location?

✓ Yes ☒ No ☐

(3) Records and results of waste analyses?

✓ Yes ☒ No ☐

(4) Reports of incidents involving implementing of the contingency plan?

✓ Yes ☒ No ☐

DATE _____

EPA ID NO. _____

RCRA COMPLIANCE INSPECTION REPORT
NARRATIVE EXPLANATIONS

SECTION _____ PART _____

SECTION _____ PART _____

SECTION _____ PART _____

(5) Records and results of required inspections?

☒ Yes ☐ No

(6) Monitoring, testing or analytical data?

☒ Yes ☐ No

(7) Closure cost estimates and for disposal facilities
post-closure cost estimates? (Not effective until
May 19, 1981.)

NA ☐ Yes ☐ No

265.76

b. Has the facility received any waste (that does not come under
the small generator exclusion) not accompanied by a manifest?

NA ☐ Yes ☐ No

a. If yes, has he submitted an unmanifested waste report to the
Regional Administrator?

NA ☐ Yes ☐ No

DATE _____

EPA ID NO. _____

RCRA COMPLIANCE INSPECTION REPORT
NARRATIVE EXPLANATIONS

SECTION _____ PART _____

SECTION _____ PART _____

SECTION _____ PART _____

- o Paint sludges to U.S. Pollution Control
Office Oklahoma City.
Site Wagona Oka.
- ~~x~~ Waste sealers, adhesives, chrom sludges
- o Solvent & thinner Solvent Recovery Corp.
Waste paints,
obsolete paints.



GM ASSEMBLY DIVISION
LEEDS PLANT

L.N. PEMBERTON
ENVIRONMENTAL ENGINEER

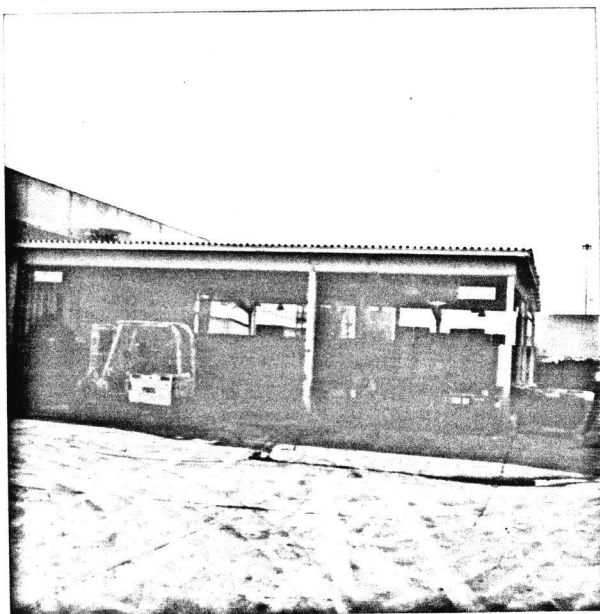
913/281-7388
6817 STADIUM DRIVE
KANSAS CITY, MO 64129

6817 STADIUM DRIVE
KANSAS CITY, MO 64129
(913) 281-7390

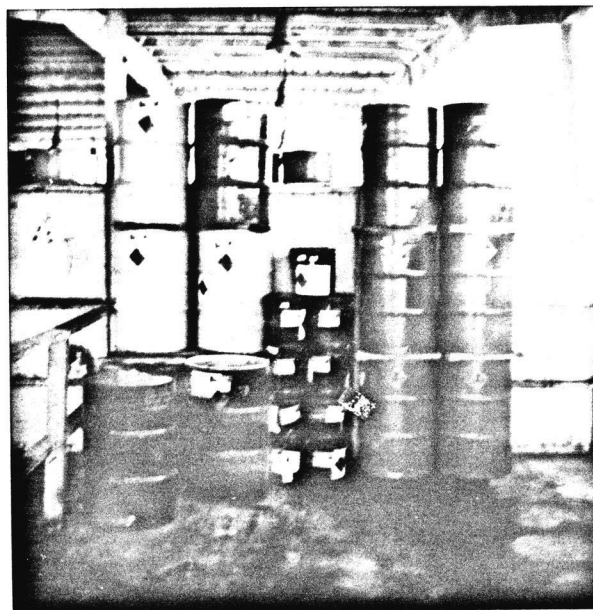
LEEDS PLANT
GM ASSEMBLY DIVISION
GENERAL MOTORS CORPORATION

JEROME E. DANIELS, P.E.
DIRECTOR - PLANT ENGINEERING





Hazardous Waste Storage Area



Waste thinners and paints in hazardous waste storage area.



Paint Sludge Gondola

Jerry Davis Director of Plant Engineering 9:00 ①
Gerry Pemberton, Environmental Engineer 9/9/82

Hazardous Waste

General Motors

all in one place

Revised part A sent in. Has now been sent back to GM at their requests.

6 Barrels of Antifreeze

• 15 " of waste thinner

• 18 5 gal cans of ~~other~~ spec off color paint

• Paint sludge to land fill in Oklahoma

Landola 6X20X4

where
sent

No Caustic Waste sludge

* No wastes in area where it was
closed to the fence before

• Ship 80 drums at a time waste thinner

• Ship Landola when full

• Start back up Aug 30, 1982

• Barrels, all had covers and plunges in.

* • ~~Caustic~~ Caustic Sludge < 10 barrels per
year.

• No lead wastes, haven't used the
process in the last year.

* • Waste Thinner, - acetone, Toluene

• Not waste generated from MEK used to check
quant.

• Formic acid. Put in tanks neutralized
and put in industrial waste. city
sewer.

Lone Mountain Surface Disposal Site

DR # 2 Box 180A

Waynoka, Oklahoma 73860

Pictures - 1. Paint Sludge Landola

Test results 2. Hazardous waste storage area

3. Waste thinners and paints

Notice of Violation Pursuant to Requirements
of the Resource Conservation and Recovery Act (RCRA).

TO: Facility Name: GENERAL MOTORS CORP., ASSY. DIV.

Address: 6817 STADIUM DRIVE

KANSAS CITY, Mo. 64129

EPA ID No: MOD 000822668

DATE: Sept 9, 1982

During an inspection just completed to determine compliance with the requirements of Subtitle C of RCRA and regulations promulgated pursuant thereto, the following violations were identified:

CFR/State Reg./Statutory Cite

Description of Violation

262.33

PLACARDS NOT AVAILABLE
FOR TRANSPORTS

This notice is provided to call your attention to those areas of noncompliance at the earliest possible time. This notice does not constitute a compliance order (Administrative Civil Complaint) issued pursuant to Section 3008 of RCRA and is not intended to be a complete listing of all violations which may be identified as a result of this inspection.

The G.M. CORP., ASSY. DIV. is hereby requested to submit in writing within 10 days of receipt of this notice a description of all corrective actions taken and/or a schedule for completion of necessary correction actions to be taken to: Chief, Air and Waste Compliance Branch, U.S. Environmental Protection Agency, Region VII, 324 East 11th Street, Kansas City, Missouri 64106. The corrective actions taken by G.M. CORP., ASSY. DIV. will be considered in determining whether any enforcement action, including the assessment of civil penalties, should be initiated.

If you have any questions on this Notice or wish to discuss your response you may call DAVID DOYLE at 816/374-2576

This Notice prepared by VINCENT V. SMITH Date SEPT 9, 1982

The undersigned person hereby acknowledges that he/she has received a copy of this Notice and has read same.

Distribution:
Original-Facility Rep.
Pink -AWCM
Yellow -ENSV
Green -State

Printed Name: L. N. PEMBERTON Date: 9/9/82

Signature: L. H. Pemberton

Title: Environmental Engineers

RCRA

Pre-Inspection Fact Sheet

SOURCES CHECKED: ENSV Files _____, AWCN Files ☒, Other _____

I. SUMMARY OF BACKGROUND INFORMATION:

Facility Name: General Motors Corp, Assembly Div.
EPA ID No: MD0000822668
Street: 6817 Stadium Drive
City: K.C. State: Mo. Zip Code: 64129
Phone: 913-281-7388 County: JACKSON

Operator: LARRY Pemberton (Contact)
Street: Same as Above
City: _____ State: _____ Zip Code: _____
Phone: _____ County: _____

Owner: Same as Operator
Street: _____
City: _____ State: _____ Zip Code: _____
Phone: _____ County: _____

Type of Ownership: _____ Federal _____ Municipal ☒ Private
_____ State _____ County

II. EPA, STATE, AND OTHER HAZARDOUS WASTE PERMITS:

Issuing Agency	Permit No.	Date	Description
	<u>MD-002895</u>		<u>NPDES</u>

~~See attached for details~~

III. DESCRIPTION OF ACTIVITY ON SITE:

_____ Generator (Form 2)	_____ Transporter (Form 3)
_____ Chemical, Physical & Biological Treatment (Form 4)	_____ Storage (Form 5)
_____ Landfill (Form 6)	_____ Incineration (Form 7)
_____ Land Treatment (Form 4)	_____ Thermal Treatment (Form 7)

Comments: _____

Note:

Supplemental forms (Listed in Parathesis) must be completed for each activity inspected. Attach all Supplemental forms to this report.

IV. INSPECTION/COMPLIANCE HISTORY:

<u>Agency</u>	<u>Date</u>	<u>Activity</u>	<u>Description</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Note: This section should include warning Letters, Orders, ISCLs, and state/EPA inspection/field activities.

GENERAL MOTORS CORP
ASSEMBLY DIVISION

LEEDS PLANT

1. Part A Permit Application 11/24/80
2. RCRA Compliance Inspection Report 11/18/81
3. LTR TO PEMBERTON FROM WAGONER RE INSPECTION LISTING DEFICIENCIES 3-01-82
4. LTR TO DOYLE FROM J.E. DANIELS/GM RE 3/1/82 EPA LTR 3/30/82
5. ENFC CASE CLOSING 4/ 8/82

MAR 1 1982

CERTIFIED MAIL
RETURN RECEIPT REQUESTED

Mr. Larry Pemberton
Plant Engineer
General Motors Corporation
Assembly Division - Leeds Plant
6817 Stadium Drive
Kansas City, Missouri 64129

MCD0008-22665
EPA I.D. No. M990457291-50-

Dear Mr. Pemberton:

On November 17, 1981, the General Motors Corporation, Leeds Assembly Plant was inspected by U.S. Environmental Protection Agency (EPA) personnel to determine this facility's compliance with Subtitle C of the Resource Conservation and Recovery Act (RCRA).

As a result of this inspection, the following deficiencies, concerning the handling of hazardous waste at this facility, were identified:

1. The facility's waste manifests did not include the generators, transporters, or designated facility's EPA identification number - 40 CFR 262.21(a), (2-4).
2. At the time of the inspection, a complete facility operating record did not exist - 40 CFR 265.73.
3. Containers containing ignitable hazardous wastes were being stored at a distance less than 15 meters from the facility property line - 40 CFR 265.176.

In addition to these noted deficiencies, the inspection of the canopied drum storage area revealed that several bung-type drums were not sealed properly. Since the inspectors were not able to examine a facility operating record, they were not able to determine if these drums contained hazardous waste.

It is requested that General Motors Corporation - GM Assembly Division take the following corrective actions and submit appropriate documentation verifying their accomplishment to this office, within 30 days of receipt of this letter.

CONCURRENCES ARHM/AWCM DDoyle:jh x 6248 2/25/82

AWCM	AWCM	AWCM	ARHM				
Doyle 2/25/82	Cozick 2/25/82	Pemberton 2/25/82	DD 2/25				

1320-1 (12-70)

JH

OFFICIAL FILE COPY

1. Immediately add the generator's, transporter's and designated facility's EPA identification number to each hazardous waste manifest.
2. Within 30 days of receipt of this letter, establish a facility operating record, in accordance with 40 CFR 265.73.
3. Immediately remove all ignitable hazardous waste being stored within 15 meters of the facility property line to a location greater than 15 meters from the facility property line.
4. Immediately determine whether the improperly sealed drums of waste located at the canopied drum storage area are hazardous. If these drums contain hazardous waste, immediately after making this determination, properly seal these drums.

Please submit this information to Mr. David Doyle, Air and Waste Compliance Branch, U.S. EPA, 324 East 11th St., Kansas City, Missouri 64106.

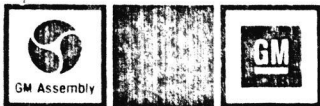
Failure to submit this information in the time periods specified could subject this facility to enforcement action, pursuant to Section 3009 of RCRA.

If you have any questions concerning this matter, please call Mr. Doyle at 374-5248.

Sincerely yours,

David A. Wagoner
Director, Air and Waste Management Division

cc: Mr. Art Groner
Missouri Department of Natural Resources



GM Assembly Division

General Motors Corporation

Leeds Plant
6817 Stadium Drive
Kansas City, Missouri 64129

March 30, 1982

Mr. David Doyle
Air and Waste Compliance Branch
U.S. EPA
324 East 11th Street
Kansas City, Missouri 64106

Subject: Response to EPA letter of March 1, 1982 on alleged
deficiencies found in EPA inspection of the GMAD
Leeds Plant on November 17, 1981

Dear Sir:

Our response to your letter of March 1, 1982 is as follows:

1. "The facility's waste manifests did not include the generators transporters or designated facility's EPA identification number."

Response: We have reviewed our Missouri manifest records for shipments of hazardous wastes and have found the following:

The Missouri manifest does not provide a designated space to contain the EPA identification numbers mentioned. The identification numbers provided by the State for generators, transporters, and facilities were completed as required.

We have instructed our personnel and supervisors to include the EPA I.D. numbers for the generator, transporter, and designated facility on future manifests, as indicated on the attached Missouri manifest.

2. "At the time of inspection, a complete facility operating record did not exist."

Response: The operating record procedure for the GMAD Leeds Plant was written and in place at the time of the inspection. However, the operating records were misplaced and therefore could not be produced at the time of the inspection.

We have since reviewed this requirement with our personnel. A copy of the operating record is being maintained by the supervisor in charge of the facility.

RECEIVED

APR 6 1982

AIR AND HAZARDOUS MATERIALS
DIVISION

3. "Containers containing ignitable hazardous wastes were being stored at a distance less than 15 meters from the facility property line."

Response: The containers that were within 15 meters of the property line fence were removed to a disposal facility immediately after the inspection.

At the time of the inspection we advised the inspectors that the drums in question were being marshalled in that area in preparation for final marking identification prior to shipment.

We have instructed our personnel not to use the area within 15 meters of the property line fence for future shipment preparation.

4. "The inspection of the drum storage area revealed that several bung type drums were not sealed properly."

Response: This alleged deficiency was not mentioned to Leeds personnel at the time of the inspection. Since receiving notification, we have examined the storage area for the condition described. At the time of our review, we were unable to find any drums that were not properly sealed.

We have reviewed this condition with our personnel, and have cautioned them to check each drum for proper seal as it is stored.

Please note that the EPA identification number for the Leeds Plant as shown on your March 1 letter is incorrect. The correct identification number for the Leeds Plant is MOD 000 822668.

If you should need additional information in this matter, please contact Larry Pemberton of my staff at 281-7388.

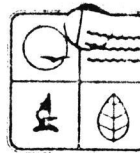
J.E. Daniels
J.E. Daniels

Director- Plant Engineering

JED/hh

Form UNR H.W.G. - 10
HAZARDOUS WASTE MANIFEST DOCUMENT
MISSOURI DEPARTMENT OF NATURAL RESOURCES
P. O. Box 1368, Jefferson City, Missouri 65102

314-751-3241



MANIFEST DOCUMENT NUMBER

01486	009	103
Generator I.D. No.	Waste I.D. No.	Shipment No.

MOD 000 822 668

1 to be completed by the generator (Instructions for completing and handling this document are on the reverse side)

me	Identification	Address	Telephone No.	Date Shipped or Re
n 1. Generator MOD 000 822 668 L.M. Day, Inc. - Leeds Plant	Generator I.D. No. 01486	6817 Stadium Dr. Kansas City, Mo. 64129	913-281-7478	3-17-82
n 2. Transporter Solvent Recovery Corp. - MOD 000 610 766	Transporter No. 11-1091	716 Mulberry Kansas City, Mo. 64101	816-474-1391	3-17-82
n 3. Treatment, Storage or Disposal Facility Solvent Recovery Corp. - MOD 000 610 766	T, S, D, Facility Permit No. RR-19	716 Mulberry Kansas City, Mo. 64101	816-474-1391	3-17-82
n 4. Proper DOT Shipping Name Waste Paint - UN 1263	DOT Hazard Class Flammable Liquid	DOT Label Required or Exceptions Flammable Liquid	Quantity 36 Drums	Units* 1 2 3 4 5

*Circle one: 1. tons; 2. gallons; 3. cubic yds; 4 drums - 55 gallon; or 5. Pounds

<p>n 5. Immediate Emergency Response Information</p> <p>Eliminate source of ignition, recover material with absorbent, avoid prolonged inhalation of vapor.</p> <p>In the event of a spill, contact the National Response Center, U. S. Coast Guard, 800-424-8802</p> <p>SPECIAL HANDLING INSTRUCTIONS</p> <p>Eliminate source of ignition</p>	<p>24-hour emergency telephone numbers</p> <p>Plant Security</p> <p>913-281-7440</p> <p>Chemtrec 800-424-9300</p>
--	---

Item 6.	Placards Provided or Affixed
	Flammable
Shipper's Check List	
DOT Labels Applied and Secure	DO Co.
Proper DOT Name on all Packages	Checked for Proper Sealing
Air Cargo Only	Peligro Label Applied

n 7. GENERATOR CERTIFICATION. This is to certify that the above named materials are properly classified, described, packaged, marked, and labeled, and are in proper condition for transportation according to the applicable regulations of the Department of Transportation and the Missouri Department of Natural Resources.

Generator's Signature St. Woods Date 3-17-82

2
to be completed by the transporter

n 8. TRANSPORTER CERTIFICATION. This is to certify acceptance of the hazardous waste shipment. Date accepted for Shipment:

Transporter's Signature Miller Langdon Date 3-17-82

n 9. TSDF CERTIFICATION. This is to certify acceptance of the hazardous waste for treatment, storage or disposal.

DF Signature Miller Langdon Date 3-17-82

SOLVENT RECOVERY CORP.

MAR 17 1982

THIS SHIPMENT RECEIVED SUBJECT TO APPROVAL WHEN OPENED
By Miller Langdon
Department Final Copy

APR 8 1982

Enforcement Case Closing - General Motors Corporation - Leeds Assembly Plant, Kansas City, Missouri (MOD000822668)

David Doyle
Environmental Engineer, AWCN

File

On November 17, 1981, the Environmental Protection Agency (EPA) conducted an inspection at the General Motors Corporation, Leeds Assembly Plant to determine compliance with Subtitle C of the Resource Conservation and Recovery Act (RCRA).

As a result of this inspection we determined that this facility had several Class III violations and noted these in our Letter of Warning (LOW) dated March 1, 1982.

On April 1, 1982, the Air and Waste Compliance Branch (AWCN) received a response to the LOW from this facility. The response adequately addressed those deficiencies noted in the LOW.

Based on these facts, I am recommending that no further action be taken in this case and that this case be closed.

ARWII/AWCN D. Doyle: rm x 5082 4-8-82

CONCURRENCES							
SYMBOL	AWCN	AWCN	AWCN	AWCN			
SURNAME	Doyle	Gokey	Subler				
DATE	4/2/82	4/8/82	4/9/82				

Part A, Permit Process --- Internal Checklist

ID Number 822668
~~MODXXXX97929~~ Firm Name GMC GM Assembly Div Leeds
Plant

Refer to Form No:	Interim Regulatory Requirements	Indicate by your initials:		Valid Prm/g Date?
		Yes	No	
1	T/S/D Facility? (If No, return to respondent.)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
3	Form 1 received?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
1	Form 3 received?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
1 & 3	Postmarked on or before November 19, 1980?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
3	Date of operation entered?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
3	Date of operation on or before November 19, 1980?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Notif. record	Notifier?	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
"	Notified on or before August 18, 1980?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
1	Form 1, XIII B signed?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
3	Form 3, IX B Signed?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	

(If all ten items above are initialed in the Yes column, generate Interim Status Acknowledgement and indicate the trigger date here: _____)

PHASE TWO

1	Unsure if regulated or non-regulated?	<input type="checkbox"/>	<input type="checkbox"/>
3	New facility?	<input type="checkbox"/>	<input type="checkbox"/>
1 & 3	Core items missing? If Yes, indicate which items: Facility name____; location____; mail address____; operator info____; certification____; process info____; waste info____; owner____; sigs____.		

PHASE THREE

1 & 3	Non-core items missing? If Yes, indicate which items: Maps____; photos____; drawings____; lat/long____. Other observations and comments:
-------	--

DATE SENT BACK _____

DATE RETURNED _____

Received Date Stamp

NOV 24 1980

(Stamp forms also)

FORM 1 GENERAL		EPA ENVIRONMENTAL PROTECTION AGENCY GENERAL INFORMATION (Read the "General Instructions" before starting)		I. EPA I.D. NUMBER	
II. FACILITY NAME		III. FACILITY ADDRESS		IV. FACILITY LOCATION	
V. FACILITY MAILING ADDRESS		VI. FACILITY LOCATION		VII. FACILITY LOCATION	
VIII. POLLUTANT CHARACTERISTICS					
<p>INSTRUCTIONS: Complete A through J to determine whether you need to submit any permit application forms to the EPA. If you answer "yes" to any questions, you must submit this form and the supplemental form listed in the parenthesis following the question. Mark "X" in the box in the third column if the supplemental form is attached. If you answer "no" to each question, you need not submit any of these forms. You may answer "no" if your activity is excluded from permit requirements; see Section C of the instructions. See also, Section D of the instructions for definitions of bold-faced terms.</p>					
SPECIFIC QUESTIONS		MARK "X" FOR ATTACHED		SPECIFIC QUESTIONS	
A. Is this facility a publicly owned treatment works which results in a discharge to waters of the U.S.? (FORM 2A)		YES NO ATTACHED		B. Does or will this facility (either existing or proposed) include a concentrated animal feeding operation or aquatic animal production facility which results in a discharge to waters of the U.S.? (FORM 2B)	
		X			
C. Is this a facility which currently results in discharges to waters of the U.S. other than those described in A or B above? (FORM 2C)		X N.A.		D. Is this a proposed facility (other than those described in A or B above) which will result in a discharge to waters of the U.S.? (FORM 2D)	
		X			
E. Does or will this facility treat, store, or dispose of hazardous wastes? (FORM 3)		X		F. Do you or will you inject at this facility industrial or municipal effluent below the lowermost stratum containing, within one quarter mile of the well bore, underground sources of drinking water? (FORM 4)	
		X			
G. Do you or will you inject at this facility any produced water or other fluids which are brought to the surface in connection with conventional oil or natural gas production, inject fluids used for enhanced recovery of oil or natural gas, or inject fluids for storage of liquid hydrocarbons? (FORM 4)		X		H. Do you or will you inject at this facility fluids for special processes such as mining of sulfur by the Frasch process, solution mining of minerals, in situ combustion of fossil fuel, or recovery of geothermal energy? (FORM 4)	
		X			
I. Is this facility a proposed stationary source which is one of the 28 industrial categories listed in the instructions and which will potentially emit 250 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an attainment area? (FORM 5)		X		J. Is this facility a proposed stationary source which is NOT one of the 28 industrial categories listed in the instructions and which will potentially emit 250 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an attainment area? (FORM 5)	
		X			
III. NAME OF FACILITY					
1 SKIP GMC GM ASSEMBLY DIVISION LEEDS PLANT					
IV. FACILITY CONTACT					
A. NAME & TITLE (last, first, & title)				B. PHONE (area code & number)	
2 PEMBERTON LARRY ENGINEER				913 281 7388	
V. FACILITY MAILING ADDRESS					
A. STREET OR P.O. BOX					
3 6817 STADIUM DRIVE					
B. CITY OR TOWN				C. STATE D. ZIP CODE	
4 KANSAS CITY				MO 64129	
VI. FACILITY LOCATION					
A. STREET, ROUTE NO. OR OTHER SPECIFIC IDENTIFIER					
5 JACKSON					
B. COUNTY NAME					
C. CITY OR TOWN					
6 JACKSON					
D. STATE		E. ZIP CODE		F. COUNTY CODE (if known)	
MO		64129			

If a preprinted label has been provided, fill it in the designated space. Review the information carefully; if any of it is incorrect, correct through it and enter the correct data in the appropriate fill-in area below. Also, if any the preprinted data is absent (the area to the left of the label space lists the information that should appear), please provide it in the proper fill-in area(s) below. If the label is complete and correct, you need not complete items I, III, V, and VI (except VI-B which must be completed regardless). Complete items if no label has been provided. Refer to the instructions for detailed item descriptions and for the legal authorizations under which this data is collected.

NOV 24 1980

VII. SIC CODES (4-digit, in order of priority)

A. FIRST 7 3 7 1 1 (specify) AUTOMOBILE ASSEMBLY PLANT				B. SECOND 7 (specify)			
C. THIRD (specify)				D. FOURTH (specify)			

VIII. OPERATOR INFORMATION

A. NAME GMC GM ASSEMBLY DIVISION LEEDS PLANT										B. Is the name listed in Item VIII-A also the owner? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
C. STATUS OF OPERATOR (Enter the appropriate letter into the answer box; if "Other", specify.) F = FEDERAL M = PUBLIC (other than federal or state) P (specify) S = STATE O = OTHER (specify) P = PRIVATE								D. PHONE (area code & no.) 9 1 3 2 8 1 7 3 8 8			
E. STREET OR P.O. BOX 817 STADIUM DRIVE											
F. CITY OR TOWN KANSAS CITY						G. STATE MO		H. ZIP CODE 6 4 1 2 9		IX. INDIAN LAND Is the facility located on Indian lands? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	

EXISTING ENVIRONMENTAL PERMITS

A. NPDES (Discharges to Surface Water) MO-002895				D. PSD (Air Emissions from Proposed Sources) NA			
B. UIC (Underground Injection of Fluids) NA				E. OTHER (specify) SEE ATTACHED			
C. RCRA (Hazardous Wastes) NA				E. OTHER (specify) NA			

MAP

Attach to this application a topographic map of the area extending to at least one mile beyond property boundaries. The map must show the outline of the facility, the location of each of its existing and proposed intake and discharge structures, each of its hazardous waste treatment, storage, or disposal facilities, and each well where it injects fluids underground. Include all springs, rivers and other surface water bodies in the map area. See instructions for precise requirements.

I. NATURE OF BUSINESS (provide a brief description)

AUTOMOBILE ASSEMBLY PLANT.

I. CERTIFICATION (see instructions)

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this application and all attachments and that, based on my inquiry of those persons immediately responsible for obtaining the information contained in the application, I believe that the information is true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

NAME & OFFICIAL TITLE (type or print) J. Coletta - GM Assembly Division Vice-President and General Manager		B. SIGNATURE 		C. DATE SIGNED 11/17/80	
--	--	------------------	--	----------------------------	--

REMARKS FOR OFFICIAL USE ONLY

GM Assembly Division

General Motors Corporation

Leeds Plant
6817 Stadium Drive
Kansas City, Missouri 64129

ATTACHMENT TO EPA FORM 3510 - 1

SECTION X - EXISTING ENVIRONMENTAL PERMITS

List of Permits for Air Pollution Sources:

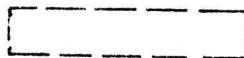
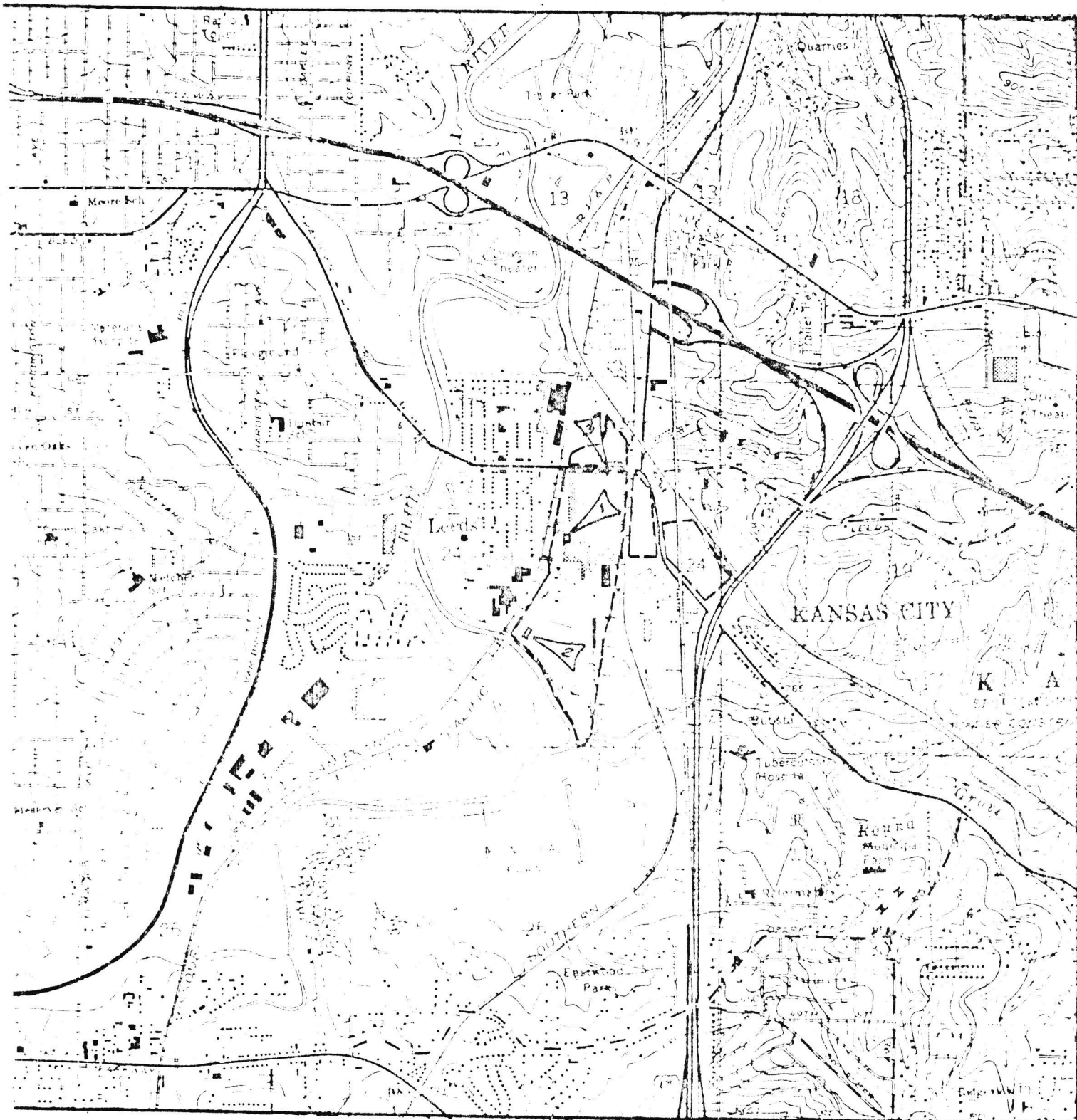
PERMIT NUMBER

SOURCE

0442	Prime Spray Booth
0443	Prime Oven
0385	Body 2nd Color Spray Booth
0376	Chassis 1st Color Spray Booth
0377	Chassis 2nd Color Spray Booth
0378	Chassis 3rd Color Spray Booth
140	Paint Spray Booths
153	Burn Off Oven
451	Chassis Plastisol Spray Booth
452	Body Plastisol Spray Booth
0453	Relocate Metal Finish Repair Booth

Permits issued by Kansas City, Missouri Health Department,
Air Quality Section

NORTH



PLANT OWNED PROPERTY.

SCALE: 0' 1000'

GM ASSEMBLY DIVISION
LEADS PLANT
6817 STADIUM DRIVE
KANSAS CITY, MO.



WASTE MARSHALLING AREA.



NPDES PERMIT- DISCHARGE OF NON
CONTACT COOLING WATER TO BLUE RIVER.



LAT. $39^{\circ} 33' 25''$ N.
LONG. $94^{\circ} 30' 13''$ W.

FORM 3	EPA	HAZARDOUS WASTE PERMIT APPLICATION Consolidated Permits Program <i>(This information is required under Section 3005 of RCRA.)</i>	EPA I.D. NUMBER <div style="border: 1px solid black; padding: 2px;"> 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 00 </div>
-------------------------	------------	--	--

FOR OFFICIAL USE ONLY		COMMENTS
APPLICATION APPROVED	DATE RECEIVED (yr, mo, & day)	

II. FIRST OR REVISED APPLICATION

Place an "X" in the appropriate box in A or B below (mark one box only) to indicate whether this is the first application you are submitting for your facility or a revised application. If this is your first application and you already know your facility's EPA I.D. Number, or if this is a revised application, enter your facility's EPA I.D. Number in Item I above.

A. FIRST APPLICATION (place an "X" below and provide the appropriate date)		2. NEW FACILITY (Complete item below.)													
<input checked="" type="checkbox"/>	1. EXISTING FACILITY (See instructions for definition of "existing" facility. Complete item below.)	<input type="checkbox"/>	2. NEW FACILITY (Complete item below.)												
<table border="1" style="width: 100px;"> <tr> <th>YR</th> <th>MO</th> <th>DAY</th> </tr> <tr> <td>29</td> <td>01</td> <td>03</td> </tr> </table>	YR	MO	DAY	29	01	03	FOR EXISTING FACILITIES, PROVIDE THE DATE (yr, mo, & day) OPERATION BEGAN OR THE DATE CONSTRUCTION COMMENCED (use the boxes to the left)	<table border="1" style="width: 100px;"> <tr> <th>YR</th> <th>MO</th> <th>DAY</th> </tr> <tr> <td></td> <td></td> <td></td> </tr> </table>	YR	MO	DAY				FOR NEW FACILITIES, PROVIDE THE DATE (yr, mo, & day) OPERATION BEGAN OR IS EXPECTED TO BEGIN
YR	MO	DAY													
29	01	03													
YR	MO	DAY													

III. PROCESSES - CODES AND DESIGN CAPACITIES

A. PROCESS CODE - Enter the code from the list of process codes below that best describes each process to be used at the facility. Ten lines are provided for entering codes. If more lines are needed, enter the code(s) in the space provided. If a process will be used that is not included in the list of codes below, then describe the process (including its design capacity) in the space provided on the form (Item III-C).

B. PROCESS DESIGN CAPACITY - For each code entered in column A, enter the capacity of the process.

- 1. AMOUNT** - Enter the amount.
- 2. UNIT OF MEASURE** - For each amount entered in column B(1), enter the code from the list of unit measure codes below that describes the unit of measure used. Only the units of measure that are listed below should be used.

PROCESS	PROCESS CODE	APPROPRIATE UNITS OF MEASURE FOR PROCESS DESIGN CAPACITY	PROCESS	PROCESS CODE	APPROPRIATE UNITS OF MEASURE FOR PROCESS DESIGN CAPACITY
Storage:			Treatment:		
CONTAINER (barrel, drum, etc.)	S01	GALLONS OR LITERS	TANK	T01	GALLONS PER DAY OR LITERS PER DAY
TANK	S02	GALLONS OR LITERS	SURFACE IMPOUNDMENT	T02	GALLONS PER DAY OR LITERS PER DAY
WASTE PILE	S03	CUBIC YARDS OR CUBIC METERS	INCINERATOR	T03	TONS PER HOUR OR METRIC TONS PER HOUR
SURFACE IMPOUNDMENT	S04	GALLONS OR LITERS			
Disposal:			OTHER (Use for physical, chemical, thermal or biological treatment processes not occurring in tanks, surface impoundments or incinerators. Describe the processes in the space provided; Item III-C.)	T04	GALLONS PER DAY OR LITERS PER DAY
INJECTION WELL	D79	GALLONS OR LITERS			
LANDFILL	D80	ACRE-FEET (the volume that would cover one acre to a depth of one foot) OR HECTARE-METER			
LAND APPLICATION	D81	ACRES OR HECTARES			
OCEAN DISPOSAL	D82	GALLONS PER DAY OR LITERS PER DAY			
SURFACE IMPOUNDMENT	D83	GALLONS OR LITERS			

UNIT OF MEASURE	UNIT OF MEASURE CODE	UNIT OF MEASURE	UNIT OF MEASURE CODE	UNIT OF MEASURE	UNIT OF MEASURE CODE
GALLONS	G	LITERS PER DAY	V	ACRE-FEET	A
LITERS	L	TONS PER HOUR	D	HECTARE-METER	F
CUBIC YARDS	Y	METRIC TONS PER HOUR	W	ACRES	B
CUBIC METERS	C	GALLONS PER HOUR	E	HECTARES	Q
GALLONS PER DAY	U	LITERS PER HOUR	H		

EXAMPLE FOR COMPLETING ITEM III (shown in line numbers X-1 and X-2 below): A facility has two storage tanks, one tank can hold 200 gallons and the other can hold 400 gallons. The facility also has an incinerator that can burn up to 20 gallons per hour.

<div style="border: 1px solid black; padding: 5px; display: inline-block;"> DUP </div>											
LINE NUMBER	A. PROCESS CODE (from list above)	B. PROCESS DESIGN CAPACITY			FOR OFFICIAL USE ONLY	LINE NUMBER	A. PROCESS CODE (from list above)	B. PROCESS DESIGN CAPACITY			FOR OFFICIAL USE ONLY
		1. AMOUNT (specify)	2. UNIT OF MEASURE (enter code)					1. AMOUNT	2. UNIT OF MEASURE (enter code)		
X-1	S02	600	G			5					
X-2	T03	20	F			6					
1	S01	26,253	G			7					
2	S02	13,247	G			8					
3	T04	86,400	U			9					
4	T04	28,800	U			10					

PROCESSES (continued)

SPACE FOR ADDITIONAL PROCESS CODES
INCLUDE DESIGN CAPACITY.

DESCRIBING OTHER PROCESSES (code "P")

FOR EACH PROCESS ENTERED HERE

TO4 - 86,400 GALLONS PER DAY (BONDERITE FILTRATION) SLUDGE DEWATERING.
TO4 - 28,800 GALLONS PER DAY (CHROMIC ACID TREATMENT) SLUDGE DEWATERING.

DESCRIPTION OF HAZARDOUS WASTES

EPA HAZARDOUS WASTE NUMBER - Enter the four-digit number from 40 CFR, Subpart D for each listed hazardous waste you will handle. If you handle hazardous wastes which are not listed in 40 CFR, Subpart D, enter the four-digit number(s) from 40 CFR, Subpart C that describes the characteristics and/or the toxic contaminants of those hazardous wastes.

ESTIMATED ANNUAL QUANTITY - For each listed waste entered in column A estimate the quantity of that waste that will be handled on an annual basis. For each characteristic or toxic contaminant entered in column A estimate the total annual quantity of all the non-listed waste(s) that will be handled which possess that characteristic or contaminant.

UNIT OF MEASURE - For each quantity entered in column B enter the unit of measure code. Units of measure which must be used and the appropriate codes are:

ENGLISH UNIT OF MEASURE CODE
POUNDS P
TONS T

METRIC UNIT OF MEASURE CODE
KILOGRAMS K
METRIC TONS M

If facility records use any other unit of measure for quantity, the units of measure must be converted into one of the required units of measure taking into account the appropriate density or specific gravity of the waste.

PROCESSES

1. PROCESS CODES:

For listed hazardous waste: For each listed hazardous waste entered in column A select the code(s) from the list of process codes contained in Item III to indicate how the waste will be stored, treated, and/or disposed of at the facility.

For non-listed hazardous waste: For each characteristic or toxic contaminant entered in column A, select the code(s) from the list of process codes contained in Item III to indicate all the processes that will be used to store, treat, and/or dispose of all the non-listed hazardous wastes that possess that characteristic or toxic contaminant.

Note: Four spaces are provided for entering process codes. If more are needed: (1) Enter the first three as described above; (2) Enter "000" in the extreme right box of Item IV-D(1); and (3) Enter in the space provided on page 4, the line number and the additional code(s).

2. PROCESS DESCRIPTION: If a code is not listed for a process that will be used, describe the process in the space provided on the form.

ITEM IV: HAZARDOUS WASTES DESCRIBED BY MORE THAN ONE EPA HAZARDOUS WASTE NUMBER - Hazardous wastes that can be described by more than one EPA Hazardous Waste Number shall be described on the form as follows:

1. Select one of the EPA Hazardous Waste Numbers and enter it in column A. On the same line complete columns B, C, and D by estimating the total annual quantity of the waste and describing all the processes to be used to treat, store, and/or dispose of the waste.
2. In column A of the next line enter the other EPA Hazardous Waste Number that can be used to describe the waste. In column D(2) on that line enter "included with above" and make no other entries on that line.
3. Repeat step 2 for each other EPA Hazardous Waste Number that can be used to describe the hazardous waste.

EXAMPLE FOR COMPLETING ITEM IV (shown in line numbers X-1, X-2, X-3, and X-4 below) - A facility will treat and dispose of an estimated 900 pounds per year of chrome shavings from leather tanning and finishing operation. In addition, the facility will treat and dispose of three non-listed wastes. Two wastes are corrosive only and there will be an estimated 200 pounds per year of each waste. The other waste is corrosive and ignitable and there will be an estimated 100 pounds per year of that waste. Treatment will be in an incinerator and disposal will be in a landfill.

LINE NO.	A. EPA HAZARDOUS WASTE NO. (enter code)	B. ESTIMATED ANNUAL QUANTITY OF WASTE	C. UNIT OF MEASURE (enter code)	D. PROCESSES	
				1. PROCESS CODES (enter)	2. PROCESS DESCRIPTION (if a code is not entered in D(1))
1	K 0 5 4	900	P	T 0 3 D 8 0	
2	D 0 0 2	400	P	T 0 3 D 8 0	
3	D 0 0 1	100	P	T 0 3 D 8 0	
4	D 0 0 2				included with above

NOTE: Photocopy this page before completing if you have more than 26 wastes to list.

EPA I.D. NUMBER (enter from page 1)													FOR OFFICIAL USE												
W													W												
1 2 3 4 5 6 7 8 9 10 11 12 13 14 15													1 2 3 4 5 6 7 8 9 10 11 12 13 14 15												
IV. DESCRIPTION OF HAZARDOUS WASTES (continued)																									
U N I T N O. L I N E	A. EPA HAZARD. WASTE NO. (enter code)	B. ESTIMATED ANNUAL QUANTITY OF WASTE	C. UNIT OF MEAS- URE (enter code)	D. PROCESSES																					
				1. PROCESS CODES (enter)																					
				2. PROCESS DESCRIPTION (if a code is not entered in D(1))																					
1	F017	525	T	501	Print sludge																				
2	F003	157,500	P	501	sulfone																				
3	F005				INCLUDED WITH ABOVE																				
4	F006	1.39	T	501 T04	Electroplating sludge (chromate and lead)																				
5	F008	64.6	T	501 T04	Electroplating bath																				
6	D008	189	T	501	Lead contaminated wastes (solder grinding)																				
7	D002	90,300	P	502	(caustic soda)																				
8																									
9																									
10																									
11																									
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25																									
26																									

V. DESCRIPTION OF HAZARDOUS WASTE (continued)
 USE THIS SPACE TO LIST ADDITIONAL PROCESS CODES FROM ITEM D(1) ON PAGE 1

EPA I.D. NO. (enter from page 1)

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64	65	66	67	68	69	70	71	72	73	74	75	76	77	78	79	80	81	82	83	84	85	86	87	88	89	90	91	92	93	94	95	96	97	98	99	00
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FACILITY DRAWING

Existing facilities must include in the space provided on page 5 a scale drawing of the facility (see instructions for more detail).

I. PHOTOGRAPHS

All existing facilities must include photographs (aerial or ground-level) that clearly delineate all existing structures; existing storage, treatment and disposal areas; and sites of future storage, treatment or disposal areas (see instructions for more detail).

II. FACILITY GEOGRAPHIC LOCATION

LATITUDE (degrees, minutes, & seconds)

LONGITUDE (degrees, minutes, & seconds)

39 33 25 N

94 30 13 W

III. FACILITY OWNER

☒ A. If the facility owner is also the facility operator as listed in Section VIII on Form 1, "General Information", place an "X" in the box to the left and skip to Section IX below.

B. If the facility owner is not the facility operator as listed in Section VIII on Form 1, complete the following items:

1. NAME OF FACILITY'S LEGAL OWNER

2. PHONE NO. (area code & no.)

913-281-7388

3. STREET OR P.O. BOX

4. CITY OR TOWN

5. ST.

6. ZIP CODE

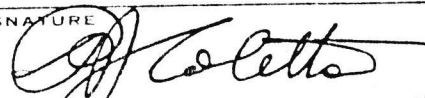
IX. OWNER CERTIFICATION

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

A. NAME (print or type)

P. J. Coletta - GM Assembly Division
Vice-President and General Manager

B. SIGNATURE



C. DATE SIGNED

11/17/80

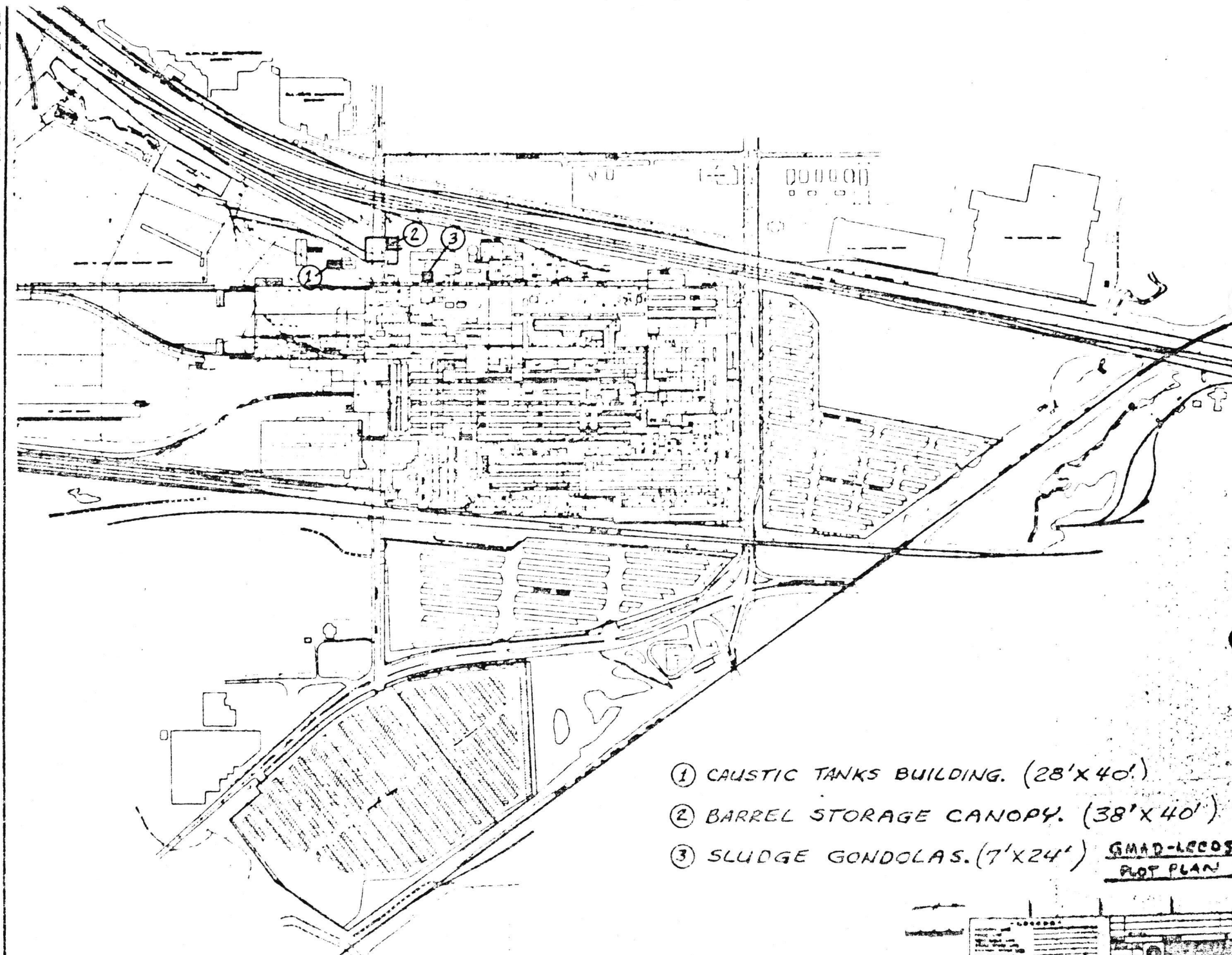
X. OPERATOR CERTIFICATION

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

A. NAME (print or type)

B. SIGNATURE

C. DATE SIGNED

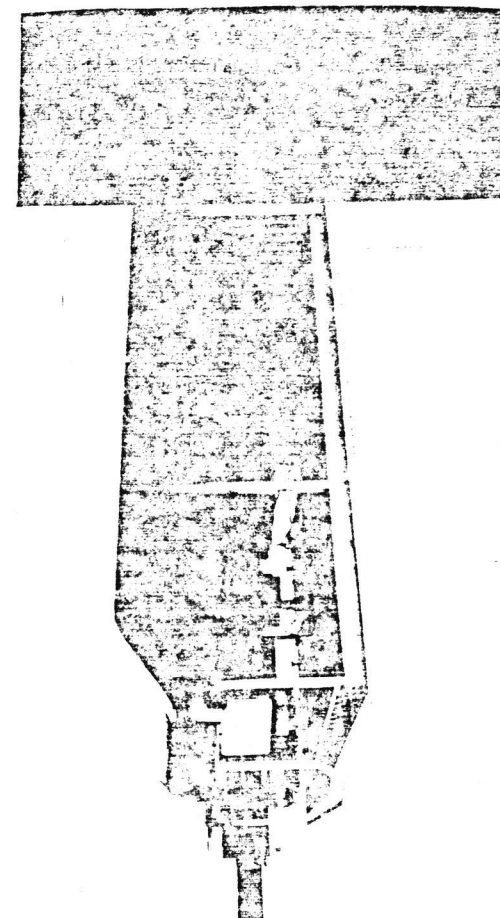
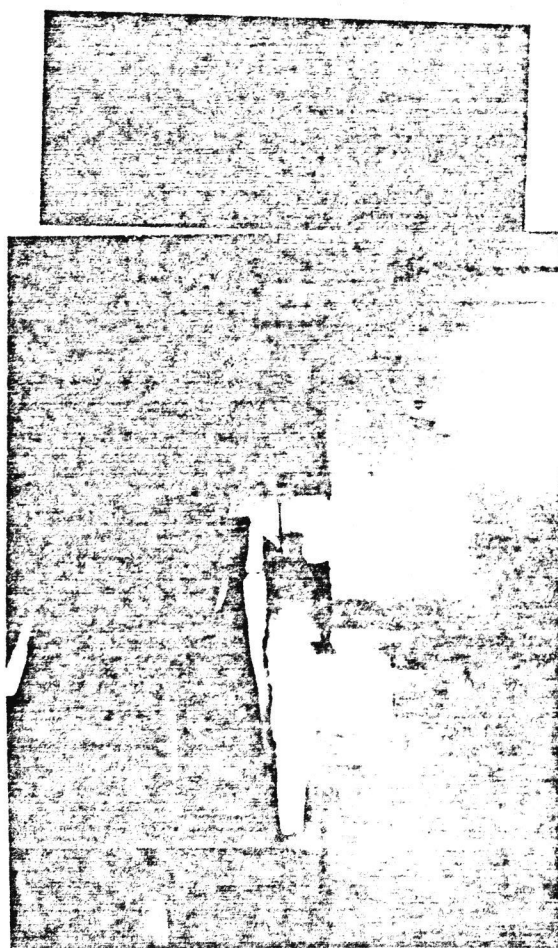
- 
- ① CAUSTIC TANKS BUILDING. (28'X40')
- ② BARREL STORAGE CANOPY. (38'X40')
- ③ SLUDGE GONDOLAS. (7'X24')

GMAD-LECOS
PLOT PLAN

GENERAL MOTORS CORPORATION
GM ASSEMBLY DIVISION
LEEDS PLANT

ATTACHMENT TO EPA FORM 3510-3

SECTION VI. PHOTOGRAPHS



611
Motors Corporation

Stadium Drive
Kansas City, Missouri 64129

FIRST CLASS MAIL

GM Assembly Division

General Motors Corporation



Leeds Plant
6817 Stadium Drive
Kansas City, Missouri 64129

EPA - REGION VII
P.O. BOX 15606
KANSAS CITY, MO. 64106